## BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998										Application of Docket Number					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAI TYP	L ENTI	ΓΥ	OTH	IER THAI LL ENTIT		
F	FOR		NUMBER FILED NUMBER EXTRA				7	RATE			RATI				
8	ASIC FEE							1		380.		R CO	760.0		
T	OTAL CLAIMS		50 minus 20=			• 30.			X\$ 9=			R X\$18	= 540		
IN	DEPENDENT	CLAIMS	9 minus 3 =			• <i>i</i>			X39=	+	$\dashv$	``			
MULTIPLE DEPENDENT CLA				LAIM PRESENT				1	<i>7</i> 03=	-	<b></b>  °	R X78=	469		
* i	* If the difference in column 1 is less than zero, enter "0" in column 2								+130=		0	R +260=			
									TOTAL	·		R TOTAL	- 176		
_	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)												IER THAN		
AMENDMENTA		REM/	AIMS AINING TER DMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI TIONA FEE		RATE	ADDI TIONA FEE		
	Total - Independent	12	2_	Minus	**	50	=10		X\$ 9=		OF	X\$18=			
Ę	FIRST PRES	TATION	N OF MI	Minus ULTIPLE DE	PEND	9	= pa		X39=		OR	X78=			
						ENT OUTIN		Γ	+130=		OR	+260=			
								L	TOTAL		OR	TOTA			
-	<u> </u>	(Colui				olumn 2)	(Column 3)	~	JUII. FEE	L		ADDIT. FEI	<u> </u>		
	_	REMA AFT AMEND	INING ER		PRI	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	13,		Minus		58_	-0		X\$ 9=		OR	X\$18=			
֡֡֡֞֝֞֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡	FIRST PRESE	NTATION	OF MU	Minus	PENDE	NT CLAIM	Ne		X39=		OR	X78=			
									130=		OR	+260=			
	•	•						ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE			
Т		(Colun				lumn 2) -	(Column 3)								
		REMAII AFTE AMENDI	NING R		PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL		
┢	Total	• 5,		Minus	••	58	<i>■ ⊖</i>	>	<b>(\$ 9=</b>	<u> </u>		X\$18=	FEE		
L.		* 4		Minus	***	4	= 0	一、	(39=		OR				
<u>ٔ ۲</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	X78=			
lf t	f the entry in column 1 is less than the entry in column 2, write "0" in column 3.								130=		OR	+260=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															
		· · · · · · · · · · · · · · · · · ·	⊸y reud (	ror (lotalor	ілдерег	ndent) is the h	nighest number fo	ound i	n the appi	opriate bo	x in colu	ımn 1.			

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Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** (Column 1) (Column 2) **SMALL ENTITY** TYPE OR **FOR** NUMBER FILED NUMBER EXTRA **RATE** FEE **RATE** FEE **BASIC FEE** 345.00 690.00 OR **TOTAL CLAIMS** minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X39 =X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +130 =+260= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) SMALL ENTITY OR **SMALL ENTITY** (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **AMENDMENT AFTER PREVIOUSLY** RATE TIONAL RATE TIONAL **EXTRA AMENDMENT** PAID FOR **FEE** FEE Total Minus X\$ 9= X\$18= OR Independent Minus = X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT AMENDMENT** RATE TIONAL **AFTER PREVIOUSLY** RATE TIONAL **EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-REMAINING ADDI-NUMBER PRESENT AMENDMENT **AFTER** RATE TIONAL **PREVIOUSLY** RATE TIONAL **EXTRA** AMENDMEN!T PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus = X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130 =+260= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20," OR ADDIT. FEE ADDIT. FEE \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

# It does NOT get mailed to the applicant.

### NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 9/247 886

#### Total Fee Calculation

		104110	c careara	-1011	•			
	Fee Code	Total .  # Claims	Number Extra	<u>x</u>	Fee	Fee	=	Total
	Sm/Lg.				Sm. Entity	Lg. Entity	,	
Basic Filing Fee	201/101					760	= ,	
Total Claims >20	203/103	<u>50</u> -20	= 30	x		540	<b></b>	
Independent Claims >3	202/102	9 -3	= 6	x		468	=	
Mult. Dep Claim Present	204/104						=	
Surcharge	205/105	• •				130	=	5. 5.
English Translation	139	•	•		·			
TOTAL FEE CALCUL	ATION .					i.	<u>;</u>	1898
Fees due upon filing	the application	<b>L</b> .			•		<b>#</b> ,s	
Total Filing Fees Du	e = \$_	18	98	_				
Less Filing Fees Sub	mitted -\$_	Ø		- 	· :			
BALANCE DUE	= \$ _	189	18			1		
Office of Initial Pate	Hant Examination		_	-				

FORM OIPE-RAM-01 (Rev. 12/97)